

# COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH PROGRAM SUPPORT BUREAU

## Departmental Quality Improvement Council Meeting

### A G E N D A

February 8, 2016  
9:00 – 10:30 a.m.  
550 S. Vermont Ave., 10<sup>th</sup> Floor Conference Room  
Los Angeles, CA 90020

Naga Kasarabada, Ph.D., Chair

Karen Lee, M.D./Carol Eisen, M.D., Co-Chairs

I	9:00 - 9:05	Introductions & Review of Minutes	QIC Members
II	9:05 – 9:35	SA QIC Reports & Countywide Children's QIC Report	QIC Members
III	9:35 – 9:40	Clinical Quality Improvement <ul style="list-style-type: none"> <li>➤ OMD Report</li> <li>➤ Peer Review Update</li> </ul>	K. Lee M. O'Donnell
IV	9:40 – 9:55	<ul style="list-style-type: none"> <li>➤ Test Calls Report CY 2015</li> <li>➤ Provider Directory</li> <li>➤ PIP Updates – CSECY, VANS</li> <li>➤ QID Liaisons Update at SA QIC's</li> </ul>	N. Kasarabada
V	9:55 – 10:00	<ul style="list-style-type: none"> <li>➤ MHSIP Report May 2015</li> <li>➤ MHSIP May 2016</li> </ul>	V. Joshi
VI	10:00 – 10:10	DMH Health and Safety Overview	A. Levina
VII	10:10 – 10:15	Patients' Rights Office <ul style="list-style-type: none"> <li>➤ FY 14-15 Grievance &amp; Appeals Report</li> <li>➤ Change of Provider Report</li> </ul>	M. Hernandez J. Walker
VIII	10:15 – 10:20	Cultural Competency Updates	M. Parada Ward
IX	10:20 – 10:30	Policy Update – Office of Compliance	R. Faveau
		Announcements:	

Next Meeting  
March 14, 2016  
9:00 – 10:30 a.m.  
550 S. Vermont Ave. 10<sup>th</sup> Floor Conference Room  
Los Angeles, CA 90020

**COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH  
QUALITY IMPROVEMENT COUNCIL (QIC) Minutes**

Type of Meeting	Departmental Quality Improvement Council	Date:	February 8, 2016	
Place	550 S. Vermont Ave., 10 <sup>th</sup> Floor Conf. Rm.	Start Time:	9:00 a.m.	
Chair	Naga Kasarabada, Ph.D.	End Time:	10:30 a.m.	
Co-Chair	Carol Eisen, M.D./Karen Lee, M.D.			
Members Present	Anna Levina; Antonio Banuelos; Bertrand Levesque; Caesar Moreno; David Tavlin; Debra Mahoney; Debi Berzon-Leitelt; Elizabeth Dandino; Emilia Ramos; Gassia Ekizian; Greg Tchakmakjian; Julie Loeb; Karen Lee; Kimber Salvaggio; Lisa Harvey; LyNetta Gore; Margaret Faye; Maria Gonzalez; Martin Hernandez; Mary Ann O'Donnell; Mary Camacho Fuentes; Michael Tredinnick; Michelle Munde; Michelle Rittel; Misty Aranoff; Monika Johnson; Randolph Faveau; Tonia Amos Jones; Vandana Joshi			
Excused/Absent Members	Ann Lee; Aprill Baker; Barbara Paradise; Carol Eisen; Elisabeth Gildemontes; Helena Ditko; Jamie Walker; Kary To; Leticia Ximenez; Sandra Chang-Ptasinski			
Agenda Item & Presenter	Discussion and Findings		Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible
Call to Order & Introductions	The meeting was called to order at 9:00 a.m.		QIC members attended this meeting.	Dr. Kasarabada
Review of Minutes	The January minutes were reviewed.		Minutes were reviewed and approved as noted.	QIC Membership

Agenda Item & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible
<b>SA QIC's Reports &amp; Countywide Children's QIC Report</b>	<b>SA 1:</b> A presentation on SB 82 navigation mobile triage team was conducted. Presentation was very successful. Test Calls Study was discussed, and volunteers were selected.	Next meeting: March 1, 2016.	D. Berzon-Leitelt
	<b>SA 2:</b> Ms. Salvaggio provided an update on a discussion that was presented on their SA Adult QI meeting that included San Fernando Valley Community MH Center, Inc. sharing their best practices with the group, specifically on how they utilize and share their data from the MHSIP surveys with staff and consumers. Also presented updates from Departmental QIC meeting.	Next meeting: March 17, 2016.	K. Salvaggio
	<b>SA 2 Children:</b> There was a joint meeting with SA 2 Adult.	Next meeting: February 18, 2016.	M. Rittel
	<b>SA 3:</b> Information from previous Departmental QIC meeting was discussed. MHSIP survey data was also discussed.	Next meeting: February 17, 2016.	B. Levesque
	<b>SA 4:</b> Mr. Vidaurri was present and provided DMH update to the group. Staff interested on SA QIC chair position. Also presented updates from Departmental QIC meeting.	Next meeting: February 16, 2016.	L. Harvey
	<b>SA 5:</b> Discussion focused on upcoming Chart/System Review and update on various QI activities regarding PRO, SA Access Center Test Calls, and SA Provider Directories. Also discussed the MHSIP Spring Survey Subscale results.	Next meeting: March 1, 2016	M. Johnson

Agenda Item & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible
<b>SA QIC's Reports &amp; Countywide Children's QIC Report Cont.</b>	<p><b>SA 6:</b> No report</p> <p><b>SA 7:</b> Information from previous Departmental QIC meeting was disseminated. Dr. Jones provided an update on MHSIP survey data.</p> <p><b>SA 8:</b> Information from previous Departmental QIC meeting was disseminated. Starting to prepare staff for the Test Calls, volunteers are needed.</p> <p><b>Countywide Children's:</b> A 15 minutes presentation on SB 785 Authorization Process and Robert Trujillo's presentation on Wraparound program is scheduled for the next meeting.</p>	<p>Next meeting: February 16, 2016.</p> <p>Next meeting: February 17, 2016.</p> <p>Next meeting: February 11, 2016.</p>	<p>A. Banuelos</p> <p>M. Munde</p> <p>D. Mahoney</p> <p>M. O'Donnell</p>
<b>Clinical Quality Improvement OMD Report</b>	<p>The final report of the 2013 Peer Review, which was presented to the Executive Management Team in October of 2015, was presented. The review focused on how many records of client receiving psychotropic medications contained a BMI and Outpatient Medication Review (OMR) which listed their current medications. It was determined that 34% of the clients did have a BMI documented, 74% of the records did have a completed OMR and that 71% of the records contained an OMR dated within the past year. Follow-up was done with the clients who did not have one in their record.</p>		

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<b>Clinical Quality Improvement OMD Report Cont.</b>	The Regional Medical Directors or Supervising Psychiatrists have apprised prescribers of the requirement to document a BMI yearly for clients prescribed an antipsychotic medication as stated in <u>DMH 3.7 Parameters For General Health-Related Monitoring in Adults</u> . Additionally, in 2015, the department adopted the Meaningful Use measurement of documenting the BMI for all clients. The parameters were revised in October of 2015 to reflect this measurement.		M. O'Donnell
<b>Test Calls Report CY 2015</b>	Dr. Kasarabada reviewed the test calls findings for CY 2015 and trends over the past five years. Hundred percent of the test calls were completed. She highlighted the improvement in the satisfaction related to interpreter services on the test calls over the past two years. However, she noted that there are areas for improvement such as logging of calls, inquiry regarding crisis situations, documentation of the name of caller, and satisfaction with ACCESS Center customer service. She explained that the test calls study results were presented to ACCESS Center staff and management and important feedback was received that has been used to revise the test calls survey form for CY 2016. Test callers are requested to listen carefully to the entire initial greeting to note the name of the agent which is announced towards the end of the greeting. SA QIC Chairs suggested that ACCESS Center consider shortening the length of the greeting to make it easier for callers to note the name.	The test calls report for CY 2015 has been posted on the PSBQI website. All SA QIC Chairs were requested to send the test calls survey results using the online form and to carefully review the test call forms in a timely manner to ensure there is no missing data prior to submitting to QID.	N. Kasarabada

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<b>Test Calls Test Calls Report CY 2015 continued</b>	The issues specific to individual test calls have been addressed by ACCESS Center supervisors with staff to ensure quality improvement on future calls. The schedule for the CY 2016 has been revised to ensure test calls are conducted during each quarter per the recent State requirement. The revised survey form allows test callers to select more than one reason for satisfaction with interpreter services and ACCESS Center agent.		N. Kasarabada
<b>Provider Directory</b>	Dr. Kasarabada stated that the Provider Directory (PD) was translated into 11 threshold languages in time for the Systems Review and will be presented for the review scheduled for this week. The updated PD has a revised classification into 5 categories – outpatient, community outreach services, 24 hour/residential, crisis services and juvenile justice. She explained that QID team has worked on this project extensively to accomplish this cultural competence objective to have this available for consumers in threshold languages. The PD has been field tested majority of the translations and a few are pending.	The PD will be posted on the PSBQI website once all versions are finalized and SA QIC Chairs will be notified. SA QIC Chairs requested a demo of the PD information including the Service Locator. Dr. Kasarabada stated that a demo would be planned in the near future.	N. Kasarabada
<b>PIP Updates – CSECY,</b>	Dr. Kasarabada presented updates on the Clinical PIP – Commercial Sexual Exploitation of Children and Youth (CSECY) and the Non-Clinical PIP-Vacancy Adjustment Notification System (VANS). QID is working collaboratively to gather CSECY clients identified by clinicians trained on CSECY and related outcomes. Clinicians from directly operated (DO) clinics can upload their client list on the SharePoint site created by QID or send their list via secure email to the CSECY mailbox created by the Transitional Age Youth (TAY) Division . Two training webinars were provided to demonstrate the process to upload this information.	QIC Chairs are requested to remind clinicians from DO clinics and contract clinics to send their client lists to the TAY Division to improve the tracking of CSECY clients.	N. Kasarabada

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<b>VANS</b>	The VANS application is currently implemented for SAs 4 and 5 and QID will be moving forward with SAs 6 and 8 for the next phase. Training webinars will be provided to providers in these SAs to implement VANS. The PIP committee has been closely working with the Service Request Tracking System (SRTS) DMH leads and Chief Information Office Bureau (CIOB) to establish the SRTS VANS link for SRTS users to access vacant slot information on VANS to facilitate timely referrals.	ACCESS Center will have access to VANS once all SAs are included in VANS.	N. Kasarabada
<b>QID Liaisons Update at SA QIC's</b>	Dr. Kasarabada stated that the two QID liaisons, Dr. Jones and Dr. Gore will be presenting consistent QI updates at their respective SA QIC meetings as a follow up to Departmental QIC meeting information presented. For example, the May MHSIP survey data specific to the SAs compared to Countywide information and potential areas for improvement and the test calls study results will be presented at the upcoming meetings.	SA QIC Chairs can coordinate presentation of this information at the upcoming QIC meetings.	N. Kasarabada
<b>MHSIP Report May 2015 MHSIP May 2016</b>	Dr. Joshi presented on the Spring 2015 Report. A total of MHSIP surveys were returned by providers. The May 2015 MHSIP report will be uploaded to the PSBQI website. The report has been finalized and Provider Tables have been prepared. The QI Liaisons (Drs. Jones and Dr. Gore) will be discussing these tables in their respective SA QI meetings. Some highlights from the report were:		V. Joshi

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<p><b>MHSIP Report May 2015</b> <b>MHSIP May 2016 continued</b></p>	<ol style="list-style-type: none"> <li>1) Increase in Older Adult Surveys from around 400 surveys in the previous survey period to around 760 surveys in this survey period. This was partly due to the emphasis in the survey training on collecting enough Older Adult Surveys for SA comparisons.</li> <li>2) The Countywide map has been revised. The report now has 4 different maps by the four survey types. Each map shows number of surveys received from each provider location.</li> <li>3) Data for the County Performance Outcomes by SA has been consolidated for easier comparison between the four survey types.</li> </ol>	<p>Dr. Joshi mentioned that in order to better prepare for the Spring 2016 MHSIP surveys, a random list of providers will be generated ahead of time so that SA Liaisons can clarify which provider numbers provide mostly field-based services and hence should not be included in the data collection.</p>	<p>V. Joshi</p>
<p><b>DMH Health and Safety Overview</b></p>	<p>Ms. Levina briefly talked about safety in the workplace and how patient safety can be impacted by health and safety of the work environment and vice versa. Ms. Levina strongly encouraged all employees to really focus on Health and Safety in their environment and make suggestions on how to make it better. DMH Health and Safety Committee meets every month. Meetings are held at DMH Headquarters with Service Areas representation. The committee comes together and discuss health and safety issues programs are dealing with. Ms. Levina encouraged staff to report any problems they might have in the workplace to their supervisors and managers, and take an active role in safety.</p>	<p>Ms. Levina encouraged staff to report any problems they might have in the workplace to their supervisors and managers, and take an active role in safety.</p>	<p>A. Levina</p>



Agenda Item & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible
<b>Patients' Rights Office (PRO)</b>	Mr. Hernandez stated that the Grievance and Appeals report is finalized. A total of 406 grievances were noted for the fiscal year. The majority were quality of care related (90%). Also he mentioned that the consumer resource directory is completed. NOA E in Spanish is posted on website. Notice of Action in Arabic, Armenian, Farsi, Cambodian, Vietnamese, and Chinese those are translated but not finalized yet. Mr. Hernandez can be contacted if there are any questions.		M. Hernandez
<b>Cultural Competency Committee Updates (CCC)</b>	Ms. Parada Ward presented on behalf of Dr. Chang Ptasinski. Ms. Parada Ward provided an update on Cultural Competency Committee (CCC). She mentioned that the CC Unit (CCU) is preparing for the Systems Review. The CCU is currently working on several documents and policies needed for the Systems Review such as the Bilingual Bonus; Language Interpreters policy. The Cultural Competency Plan was updated and also the CC Committee annual report was completed. She also announced the CCC elected two co-Chairs for this Calendar Year. The co-chairs are Dr. Leticia Ximenez and Ms. Berenice Mascher.	Next meeting: February 10, 2016.	M. Parada Ward

<b>Agenda Item &amp; Presenter</b>	<b>Discussion &amp; Findings</b>	<b>Decisions, Recommendations, Actions, &amp; Scheduled Tasks</b>	<b>Person Responsible</b>
<b>Policy Update – Office of Compliance</b>	Mr. Faveau from Compliance Privacy and Audit Services Bureau provided an update on policies and reviewed the handout.		R. Faveau
<b>Handouts:</b>	<ul style="list-style-type: none"><li>➤ Summary Report of Test Calls Study: Monitoring Accessibility to the 24/7 Toll Free Access Line January 2016</li><li>➤ 2013 Psychiatrist Peer Review Medication Monitoring February 2016</li><li>➤ Policy/Procedure Update February 8, 2016</li></ul>		

Respectfully Submitted,

Naga Kasarabada, Ph.D.